

AMENDED SCHEDULE IIn re GERALD LAMONT ROEBUCK, SR.Case No. 04-43855

Debtor

SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

Debtor's Marital Status: Married	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP	AGE 17
EMPLOYMENT:		
DEBTOR		SPOUSE
Occupation	Security	Unit coordinator Age 47
Name of Employer	Minneapolis College of Arts & Design	North Memorial Healthcare
How long employed	2.5 years	Six years
Address of Employer	Minneapolis, MN	Robbinsdale, MN

INCOME: (Estimate of average monthly income)

Current monthly gross wages, salary, and commissions (pro rate if not paid monthly)

Estimated monthly overtime

SUBTOTAL

LESS PAYROLL DEDUCTIONS

a. Payroll taxes and social security

b. Insurance

c. Union dues

d. Other (Specify)

SUBTOTAL OF PAYROLL DEDUCTIONS

TOTAL NET MONTHLY TAKE HOME PAY

Regular income from operation of business or profession or farm (attach detailed statement)

Income from real property

Interest and dividends

Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above

Social security or other government assistance (Specify)

Pension or retirement income
PT/cleaner/Blue Bird Cleaning/Fridley/2 weeksOther monthly income \$600 gross/\$200 taxes/\$400 net
(Specify) PT/cleaner/Deb Thurman/Coon Rapids/3 mos

\$258 gross/\$70 taxes/\$188 net

TOTAL MONTHLY INCOME 4,705.00

TOTAL COMBINED MONTHLY INCOME \$ 4,305.00

DEBTOR	SPOUSE
\$ 2,408.00	\$ 2,724.00
\$ 0.00	\$ 0.00
\$ 2,408.00	\$ 2,724.00
\$ 495.00	\$ 494.00
\$ 0.00	\$ 26.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 495.00	\$ 520.00
\$ 1,913.00	\$ 2,204.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 400.00	\$ 188.00
\$ 0.00	\$ 0.00
\$ 2,313.00	\$ 2,392.00

(Report also on Summary of Schedules)

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

AMENDED SCHEDULE J

In re GERALD LAMONT ROEBUCK, SR.

Case No. 04-43855

Debtor

SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

Rent or home mortgage payment (include lot rented for mobile home)	\$	<u>1,459.00</u>	
Are real estate taxes included? Yes <u>X</u> No			
Is property insurance included? Yes <u>X</u> No			
Utilities: Electricity and heating fuel	\$	<u>300.00</u>	
Water and sewer	\$	<u>0.00</u>	
Telephone	\$	<u>60.00</u>	
Other <u>Hhld goods-\$10/cable-\$70</u>	\$	<u>80.00</u>	
Home maintenance (repairs and upkeep)	\$	<u>100.00</u>	
Food	\$	<u>350.00</u>	<u>394.</u>
Clothing	\$	<u>120.00</u>	
Laundry and dry cleaning	\$	<u>25.00</u>	
Medical and dental expenses	\$	<u>45.00</u>	
Transportation (not including car payments)	\$	<u>157.00</u>	
Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	<u>25.00</u>	
Charitable contributions	\$	<u>0.00</u>	
Insurance (not deducted from wages or included in home mortgage payments)			
Homeowner's or renter's	\$	<u>0.00</u>	
Life	\$	<u>0.00</u>	
Health	\$	<u>0.00</u>	
Auto	\$	<u>187.00</u>	
Other	\$	<u>0.00</u>	
Taxes (not deducted from wages or included in home mortgage payments)			
(Specify)	\$	<u>0.00</u>	
Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)			
Auto	\$	<u>0.00</u>	
Other <u>Wife's chapter 13 payment</u>	\$	<u>712.00</u>	<u>1068.</u>
Other	\$	<u>0.00</u>	
Other	\$	<u>0.00</u>	
Alimony, maintenance, and support paid to others	\$	<u>0.00</u>	
Payments for support of additional dependents not living at your home	\$	<u>0.00</u>	
Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	<u>0.00</u>	
Other	\$	<u>0.00</u>	
Other	\$	<u>0.00</u>	
TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)	\$	<u>3,620.00</u>	<u>4020.</u>

[FOR CHAPTER 12 AND 13 DEBTORSONLY]

Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, annually, or at some other regular interval.

A. Total projected monthly income	\$	<u>4,305.00</u>	<u>4,705.00</u>
B. Total projected monthly expenses	\$	<u>3,620.00</u>	<u>4,020.00</u>
C. Excess income (A minus B)	\$	<u>685.00</u>	
D. Total amount to be paid into plan each <u>Monthly</u>	\$	<u>685.00</u>	

(interval)

UNITED STATES BANKRUPTCY COURT
DISTRICT OF MINNESOTA

In re:
Gerald L. Roebuck, Sr.,

Bkry Case No: 04-43855
Chapter 13 Case

**UNSWORN CERTIFICATE
OF SERVICE**

Debtor(s).

I, Robin Nori, employed by Hoglund, Chwialkowski, Greeman & Bergmanis, P.L.L.C., attorneys licensed to practice law in this Court, with office address of 1611 West County Road B, Suite 106, Roseville, Minnesota 55113, declare that on October 20, 2004, I served the Notice of Modification and Hearing on Confirmation of Plan, Modified Chapter 13 Plan, and amended Schedules I and J, to each of the entities named below by mailing to each of them a copy thereof by enclosing the same in an envelope with first class mail postage prepaid and depositing the same in the post office in Roseville, Minnesota, addressed to each of the entities as follows:

- - - - -
Ms. Jasmine Z. Keller United States Trustee
Trustee in Bankruptcy 1015 United States Courthouse
12 South Sixth Street #310 300 South Fourth Street
Minneapolis, Minnesota 55402 Minneapolis, Minnesota 55415

Gerald L. Roebuck, Sr.
3806 - 58th Avenue
Brooklyn Center, Minnesota 55429

all creditors/parties in interest listed on matrix (see attached)
- - - - -

And I declare, under penalty of perjury, that the foregoing is true and correct.

Dated: October 20, 2004

Signed: /e/ Robin Nori
Paralegal

ACCENT SVC CO
PO BOX 1887
NORFOLK NE 68702

ALLIED INTERSTATE
PO BOX 1471
MINNEAPOLIS MN 55440

ALLSTATE INS
75 EXECUTIVE PKY
HUDSON OH 44237

AMERICAN FAMILY PUBLISHERS
PO BOX 62000
TAMPA FL 33662-2000

AMERIQUEST MORTGAGE
PO BOX 51382
LOS ANGELES CA 90051

ASCENSION LAW GROUP
PO BOX 201909
ARLINGTON TX 76006

BADGER CREDITORS INC
PO BOX 247
WAUSAU WI 54402

BROOK WEST FAMILY DENTISTRY
7001 - 78TH AVE #100
BROOKLYN PARK MN 55445

BROOKPARK DENTAL CENTER
6437 BROOKLYN BLVD
BROOKLYN CENTER MN 55429

CAR CREDIT
317 MAIN STREET
HOPKINS MN 55343

COLLTECH INC
PO BOX 44430
EDEN PRAIRIE MN 55344

DEPT OF DRIVER & VEHICLE SERVICES
445 MINNESOTA STREET STE 180
SAINT PAUL MN 55101-5180

DES MOINES GENERAL HOSPITAL
603 W. 12TH
DES MOINES IA 50304

EARTHLINK INC
PO BOX 530530
ATLANTA GA 30353-0530

ENDODONTIC ASSOC
655 WEST MAIN STREET
ANOKA MN 55303

FIRST CHOICE MOVERS
4505 NATHAN LANE STE 211
PLYMOUTH MN 55442

GC SERVICES
6330 GULFTON
HOUSTON TX 77081

GLENDAL CLINIC
4568 W BROWN DEER RD
BROWN DEER WI 53209

HEALTHSPAN ALLIANCE HEALTH CARE
2204 E 117TH STREET
BURNSVILLE MN 55337

HENNEPIN COUNTY CONCILIATION
COURT
ROOM 306 CITY HALL
350 SOUTH 5TH STREET
MINNEAPOLIS MN 55415

INTERNAL REVENUE SERVICE
STOP 5700
316 N ROBERT ST
ST PAUL MN 55101

JAYHAWK
PO BOX 201909
ARLINGTON TX 76006

KENNETH SALO DDS
502 JEFFERSON HWY
CHAMPLIN MN 55316

MICHAEL K. HOVERSON & ASSOC.
333 WASHINGTON AVE. N. STE 308
MINNEAPOLIS MN 55401

MINNEAPOLIS RADIOLOGY ASSOC
3300 OAKDALE AVE N
ROBINSDALE MN 55422

MN DEPT OF REVENUE
551 BKCY SECTION CEU DEPT
PO BOX 64447
ST PAUL MN 55164

NATIONAL MAGAZINE EXCHANGE
PO BOX 9083
CLEARWATER FL 33758-9083

NCO FINANCIAL SYSTEMS
PO BOX 41457
PHILADELPHIA PA 19101-1457

NORTH CLINIC
3366 OAKDALE AVE N #215
ROBBSINSDALE MN 55422-2979

NORTH MEMORIAL HEALTHCARE
3300 OAKDALE AVE N
ROBBSINSDALE MN 55422

PLAZA ASSOCIATES
JAF STATION
PO BOX 2769
NEW YORK NY 10116-2769

PROGRESSIVE
DEPT 0561
CAROL STREAM IL 60132-0561

PROVIDIAN
PO BOX 9553
MANCHESTER NH 03108-9553

READERS DIGEST
PO BOX 8010
PRESCOTT AZ 86304-8010

RISK MGMT ALTERNATIVES
4360 NE EXPRESSWAY - 52 H
ATLANTA GA 30340

SPORTS ILLUSTRATED
PO BOX 60001
TAMPA FL 33660-0001

STEVEN T. ROSSO
1600 WYNNE AVENUE
SAINT PAUL MN 55108

SUSAN GALLAGHER
10 SOUTH 5TH STREET STE 700
MINNEAPOLIS MN 55402

US WEST
PO BOX 1301
MINNEAPOLIS MN 55483

WILLIAM GREEN
3216 S. 92ND STREET
MILWAUKEE WI 53202

YOST & BAILL
2350 ONE FINANCIAL PLAZA
120 S SIXTH ST
MINNEAPOLIS MN 55402

ROYLENE CHAMPEAUX ATTY
600 US COURTHOUSE
300 S 4TH ST
MINNEAPOLIS MN 55415

THE RAMSEY FIRM
ATTN ASCENSION ACQUISITIONS
ACCT 00090555
PO BOX 200277
ARLINGTON TX 76006

UNITED STATES BANKRUPTCY COURT
DISTRICT OF MINNESOTA

In re:
Gerald L. Roebuck,

Bankruptcy Case Number: 04-43855

SIGNATURE DECLARATION

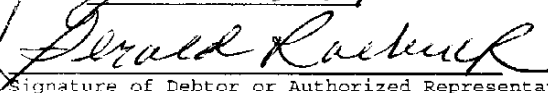
Debtor(s).

- () PETITION, SCHEDULES & STATEMENTS
() CHAPTER 13 PLAN
() SCHEDULES AND STATEMENTS ACCOMPANYING VERIFIED CONVERSION
(X) AMENDMENT TO PETITION/SCHEDULES/STATEMENTS/DOCUMENTS
(X) MODIFIED CHAPTER 13 PLAN/MOTION FOR HEARING
() OTHER: (Please describe) _____
(X) VERIFICATION: I(We), debtor(s) named in the attached amended schedule(s),
declare under penalty of perjury that the foregoing is true and correct.

I[We], the undersigned debtor(s) or authorized representative of the debtor(s),
make the following declarations under penalty of perjury:

- The information I have given my attorney and provided in the electronically filed petition, statements, schedules, amendments, and/or chapter 13 plan, as indicated above, is true and correct;
- The information provided in the "Debtor Information Pages" submitted as a part of the electronic commencement of the above-referenced case is true and correct;
- **[individual debtors only]** If no Social Security Number is included in the "Debtor Information Pages" submitted as a part of the electronic commencement of the above-referenced case, it is because I do not have a Social Security Number;
- I consent to my attorney electronically filing with the United States Bankruptcy Court my petition, statements and schedules, amendments, and/or chapter 13 plan, as indicated above, together with a scanned image of this signature Declaration and the completed "Debtor Information Pages," if applicable; and
- **[corporate and partnership debtors only]** I have been authorized to file this petition on behalf of the debtor.

Date: 10-20-2004


Signature of Debtor or Authorized Representative

Signature of Joint Debtor

Gerald L. Roebuck
Printed Name of Debtor or Authorized Representative

Printed Name of Joint Debtor

HOGLUND, CHWIALKOWSKI, GREEMAN & BERGMANIS, P.L.L.C.

Signed: /s/ Robert J. Hoglund
Robert J. Hoglund #210997
1611 West County Road B, Suite 106
P.O. Box 130938
Roseville, Minnesota 55113
Telephone Number: (651) 628-9929